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Ornan Oliver Erekson Jr 7093105 ame and Prisoner/Booking Number	
	CLERK U.S. DISTRICT COURT
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ailure to notify the Court of your change of address may i	result in dismissal of this action.)
	ATES DISTRICT COURT
FOR THE DIST	TRICT OF ARIZONA
orrion Oliver Erekson Jr	
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all Name of Plaintiff) Plaintiff,	CV-13-00621-PHX-NVW(JF
Plaintiff, VS.) CV-13-00621-PHX-NVW(JF) CASE NO.
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vs.) CASE NO.
Vs. Charles L Ryan Il Name of Defendant)) CASE NO.
Vs. Charles L Ryan ill Name of Defendant)) CASE NO
Vs.) Charles L Ryan il Name of Defendant)) C. Hale	CASE NO
vs. Charles L Ryan Il Name of Defendant) C, Hale) CASE NO
Vs.) Charles L Ryan il Name of Defendant)) C. Hale) COTT Estrada	CASE NO. (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER
VS.) Charles L Ryan ill Name of Defendant) () C, Hale () COTTL Estrada	CASE NO. (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER CIVIL RIGHTS COMPLAINT COMP
Vs.) Charles L Ryan ill Name of Defendant) () C. Hale) COTTL Estrada) Defendant(s).	CASE NO. (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER
VS.) Charles L Ryan ill Name of Defendant) () C, Hale () COTTL Estrada	CASE NO. (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER Original Complaint
vs. Charles L Ryan Will Name of Defendant) Charles L Ryan Charles L Ryan Defendant(s).	CASE NO. (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER (To be supplied by the Clerk)
Charles L Ryan all Name of Defendant) C. Hale COTTL Estrada Defendant(s). Check if there are additional Defendants and attach page 1-A listing them.	CASE NO. (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER Original Complaint First Amended Complaint Second Amended Complaint
Charles L Ryan All Name of Defendant) C. Hale COIII Estrada Defendant(s). Check if there are additional Defendants and attach page 1-A listing them.	(To be supplied by the Clerk) (To be supplied by the Clerk) (CIVIL RIGHTS COMPLAINT BY A PRISONER (CIVIL RIGHTS COMPLAINT BY A PRISONER (CIVIL RIGHTS COMPLAINT (CIV
Charles L Ryan A. JUR	CASE NO. (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER (To be supplied by the Clerk) CIVIL RIGHTS COMPLAINT BY A PRISONER (To be supplied by the Clerk)
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B. DEFENDANTS

1.	Name of first Defendant: Charles L Ryan			
Director of Prisons (Position and Title)		at Arizona Department of Corrections		
	(Position and Title)	(Institution)		
2.	Name of second Defendant: C. Hale	The second Defendant is employed as:		
	Mexford Medical Administrator (Position and Title)	at ASPC-Yuma		
	(Position and Title)	(Institution)		
3.	Name of third Defendant: Co III Estrada	The third Defendant is employed as:		
	(Position and Title)	(Institution)		
4.	Name of fourth Defendant:	The fourth Defendant is employed as:		
		at		
	(Position and Title)	at (Institution)		
f vo	ou name more than four Defendants, answer the questions list	ted above for each additional Defendant on a senarate nage.		
- , .		real above to the additional personal of a separate page.		
	C. PREVIOUS	LAWSUITS		
l.	Have you filed any other lawsuits while you were	a prisoner?		
	Have you filed any other lawsuits while you were If yes, how many lawsuits have you filed?			
	If yes, how many lawsuits have you filed?			
	If yes, how many lawsuits have you filed? a. First prior lawsuit:	Describe the previous lawsuits:		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties:			
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number:	Describe the previous lawsuits:v		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number:	Describe the previous lawsuits:		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number:	Describe the previous lawsuits:v		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was in)	Describe the previous lawsuits:v		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was in) b. Second prior lawsuit:	Describe the previous lawsuits: vt appealed? Is it still pending?)		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was in) b. Second prior lawsuit: 1. Parties:	Describe the previous lawsuits:v.		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was in the case dismissed) was in the case dismissed? b. Second prior lawsuit: 1. Parties: 2. Court and case number:	Describe the previous lawsuits: vt appealed? Is it still pending?) v		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was in the case dismissed) was in the case dismissed? b. Second prior lawsuit: 1. Parties: 2. Court and case number:	Describe the previous lawsuits: vt appealed? Is it still pending?)		
	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was in the case dismissed?	Describe the previous lawsuits: vt appealed? Is it still pending?) v		
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	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was in b. Second prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was in c. Third prior lawsuit: 1. Parties:	Describe the previous lawsuits:		
1.	If yes, how many lawsuits have you filed? a. First prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was it) b. Second prior lawsuit: 1. Parties: 2. Court and case number: 3. Result: (Was the case dismissed? Was it) c. Third prior lawsuit: 1. Parties: 2. Court and case number: 2. Court and case number:	Describe the previous lawsuits:		

If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.

D. CAUSE OF ACTION

	COUNT 1
1. St of the	the constitutional or other federal civil right that was violated: Eight Amendment Unled States Constitution
2. Co	Int I. Identify the issue involved. Check only one. State additional issues in separate counts. Basic necessities
each Deciting leading	1)3 I set in the hole for 5 thys asking for help my skin borning the hole volony would be nothing they would be my tray of bood on the trop and
	ninistrative Remedies: Are there any administrative remedies (grievance procedures or administrative appeals) available
a.	at your institution?
b.	Did you submit a request for administrative relief on Count I?
c.	Did you appeal your request for relief on Count I to the highest level?
d.	If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. did not appeal the Grewing News recoverd congressions. Nor did I
	recive Day response to My Informal Complaint "Copy of Grievanes Attached"

The DOC Staff coold see my hole body had severe burns on it. Plus My hands and feet were swelling so bed that my skin was spliting. blood and pus were possing from when my skin was spliting. when the nurse did show up on the 16th of January all she said was that I can return to my unit. That was done on the 17th of January around 9 PM I was still in extreme pain and I showed DOC staff on my unit who called Medical. Their was told that medical has already cleared me and there was nothing that could be done.

Finally after 11 days with my skin burned and bleeding hands and feet pas oozing from all over my body I was taken to the hospital in yound were I was treated for my burns on my body.

On 1-22-13 I filed a informal Complaint. My response From My COTT which stated that my informal Complaint was about Promises Condition. See attached informal Complaint and Response From My CO IT Estrada where they only bring up the Promises and nothing about my burns or being taken to the hospital.

Then on 3/4-/13 C. Hale wrote a immate letter Response
Stadaing my primary concern is treatment for my Psoriasis. Im sure
this court can see by reading my Immate informal complaint that
my Psoriasis was in fact why I went to nedical, but what happened
after was my primary Concern. Then to make matters worse when
I filed my immate Grievance on 2-11-13 sence I didn't recive
a response My cottl was not in his office for me to get the
appeal grievance in the time limit. Then when he dose show
up he wont give me the form to appeal Saying my time

limit to Appeal 15 past. And refused to give he the Form to file a appeal. All I could do at this time was what was happening.

To date I still haven't received the reducation that the hospital has ordered for me, my skin is still bornt and I need to be seen by a doebor. My body has born marks and scars all over it I would ask this court to order DOC to let me see a Doebor

1.	State the constitutional or other federal civil right that was violated:	
2.	Count II. Identify the issue involved. Check only one. State addition ☐ Basic necessities ☐ Mail ☐ Access to the ☐ Disciplinary proceedings ☐ Property ☐ Exercise of re ☐ Excessive force by an officer ☐ Threat to safety ☐ Other:	court
	Supporting Facts. State as briefly as possible the FACTS supporting ch Defendant did or did not do that violated your rights. State the facts cling legal authority or arguments.	
4.	Injury. State how you were injured by the actions or inactions of the I	Defendant(s).
	 Administrative Remedies. a. Are there any administrative remedies (grievance procedures or a at your institution? b. Did you submit a request for administrative relief on Count II? c. Did you appeal your request for relief on Count II to the highest led. If you did not submit or appeal a request for administrative relief a you did not. 	☐ Yes ☐ No ☐ Yes ☐ No evel? ☐ Yes ☐ No

E. REQUEST FOR RELIEF

State the relief you are seeking:	
At this time I'm Seeky Nedical treating	unt and court cost any another else this
Gurt seems it has the power on age	I'm not a Atty this prison has NO
Law library at All Madral assesses	in the fature
LOCO (GOC OF PATE PARENTS)	
	•
I 1 1 1 - 1 1 1	to a lin terms and a armost
I declare under penalty of perjury that the foregoi	ing is true and correct
Executed on 3-25 13	
	CICNATUDE OF ILLAD FIEE
DATE	SIGNATURE OF PLAINTIFF
•	
(Name and title of paralegal, legal assistant, or	
other person who helped prepare this complaint)	
(Signature of attorney, if any)	
(Attorney's address & telephone number)	

ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If you need more space, you may attach no more than fifteen additional pages. But the form must be completely filled in to the extent applicable. If you attach additional pages, be sure to identify which section of the complaint is being continued and number all pages.

Inmate Gripvance				Title COZ	#	San Carallana (Carallana Carallana Carallana Carallana Carallana Carallana Carallana Carallana Carallana Caral
Note: You may appeal the Grievance Coordinator's Warden/Deputy Warden/Administrator by filing form to				Badge Number		Date
calendar days of receipt of this notice.			ļ	6826		2-11-13
Inmate Name (Last, First M.I.) Erek 300 Orrow		ADC Numl Ogるい		[Date 2	11 - 13
Institution/Facility Lo Paz (of 16 Yom	1	Case Num		2-014-1	3	
To: CoTTT Solis						
Description of Grievance (To be completed by the inmate)		ere to re:	and for	w informal	Resolu	tion dated
1-22-13 on 14 we where it was sto	led that as	1-11-13	I went t	medical to	zee ak	not my
Prorioris which Medical has tracted						1 1 1
to get out of CDU. That latter					ed th	12 Loition
to get out of CDU. That lathon DOC Staff in CDU I was burne		1 .	_	1 1 1 1	stow !	Dem a local
After hours of this They soud they		_				6 -
nedical on 1-16-13 who losiban	id you an i	do park	to your	wit On	1-17-13	77 of 2 200 1
Called medical because my skin b	ad Severe	2000	Plus Su	litaci pulle	2 pm	un spolit
Medical in turn said there was nothing) in			. ^		
Finally After 11 days with my skin be						idy from
Spliting from the surling I was taken	•				Not pr	ion dining out
of the made that the Doctor has A						
Proposed Resolution (What informal attempts have been in			action(s) would			n help re
with getting thom. I need to be			<u> </u>	Care and		
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Inmate's Signature Da	ate	Grievano	e Coordinat	or's Signature		Date
Ciptuff 2	·//·/3		7平5	olis 66	1 C.	2/12/13
Action taken by		Docun	nentation of I	Resolution or Att	empts at i	Resolution.
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Staff Member's Signature		E	Badge Numb	er	Date	

Se 213-cv-00621-NVW--JFM Document 1 Filed 03/27/13

Received By

Inmate: Erekson, Orrion

ADC# 093105

La Paz

Y08-014-13

Your grievance of 02-11-13 was received by medical on 02-20-13 and is based upon your complaint that you have not received medication prescribed to you for your psoriasis.

You raised an issue in your informal inmate letter dated 01-22-13 stating you have psoriasis and did not receive proper treatment for your condition which caused you further injury. On 02-11-13 CO III Estrada responded to your informal inmate letter stating: On 01-24-13 I forwarded the informal complaint resolution to C. Hale, Wexford Medical Administrator, for an appropriate response. As of today 02-11-13 I have not received a response.

Investigation into your medical issue is as follows: The medication prescribed to you for the ongoing problem with your psoriasis was dispensed to you on 01-23-13.

Your grievance is therefore resolved.

You have the right to appeal this decision to Juliet Respicio-Moriarty, Inmate Appeals Grievance Investigator by filing a form 802-3 within 5 calendar days of receipt of this notice.

Cyndy Hale, Complex Site Manager

Date

COTH Estrada wold Not let me oppeal this stating that

C. Hale did not respond in time Fram

Case 2:13-cv-00621-NVW--JFM Document 1 Filed 03/27/13 Page 10 of 15

ARIZONA DEPARTMENT OF CORRECTIONS Inmate Informal Complaint Response	For Distribution: Copy of Corresponding Inmate Informal Complaint Resolution must be attached to this response.			
Inmate Name (Lest, First M.I.)	ADC Number			
EREKSON, ORRION O.	093105			
Institution/Unit				
ASPC/YUMA/LA PAZ				

From	Location
CO III Estrada	6E16L

In response to your informal complaint dated 01/22/13 about your ongoing problem with your Psoriasis condition.

On 01/24/13 I forwarded the informal complaint resolution to C. Hale/Wexford Medical Administrator for an appropriate response. As of today 02/11/13 I have not received a response. You have five work days from the date of this response to file the formal complaint using the inmate grievance form 802-1.

CO III Estrada

Staff Signature	Date
Affects of the second of the s	2-11-13

Distribution:

Original - Inmate Copy - Grievance Coordinator File

Case 2:13-cv-00621-NVW--JFM Document 1 Filed 03/27/13 Page 11 of 15



ARIZONA DEPARTMENT OF CORRECTIONS

Compleints are limited to one page and one issue.

NO ATTACHMENTS PERMITTED. Please print all information.

Inmate Informal Complaint Resolution	information.	Please print a

Inmate Name (Last, First M.I.)	ADC Number	Institution/Unit		Date
Erekson, Orrion	093105	Yuma/Lapoz	:	1-22-13
To COTT Estrada		Location	F	
State briefly but completely the problem on wh	ich vou desire assistand	ce. Provide as many del	iails as nossible	A. A. C.
on Friday January 11th I went to On you problem with Promosis where From Keete Store now, when I was opinion. The next thing I linew Im to no cloths untill that night where I is leaden and take a Shower. I did and bring they said they would in when the noise did see my body had they I raid I could be returned to be from where my skin has split from was noting they need to do since in do. Finally after 11 days with my sto the Hospital in young ware I.	seen the norse to to seen the norse way taken off unit was by Doc Staff as I was told! I whom we dead with Severe borns purpus unit which is the Siwelling, Doc getien has chere	rent here, but stop end to ask another tound placed into I would stong until a told Doc stass to thich took until a war done on Thur treme poinn and the stass called medically	oned saying I or norse for a country where we shall no country we stong a country where down a country where down a country we could not country who country who country we could not country who country we could not country who country we could not country who could not country who could not country where could not country we could not country who could not country and country we could not country and country who could not country and	could by cream secound T sut with one Kind of extreme pam many 16th will they split 17th around 23 was cozen on Saud there
Resolution At this time I don't think there		to this and I n	sed to file	a
Theimer				
Inmate Signature 2 Sup	12		Date / · 23	. 13
Have You Discussed This With Institution Staff	?	□ No		
16 Mars and 18 Mar		. 110	•	
in 1 co, give me stan member mame;	Dickson			

Distribution: Original - Inmate

Copy - Grievance Coordinator File

802-11(e) 12/19/12

ARIZONA DEPARTMENT OF CORRECTIONS Inmate Griden Accordance of the control of the

Inmate Grievance Appeal

The inmate may appeal the Warden's, Deputy Warden's or Administrator's decision to the Director by requesting the appeal on this form.

(To be completed by staff member initially receiving appeal)

Received b	y:	
Title:		
Badge #: Date:		
Date:		
I		

PLEASE PRINT				
Inmate's Name (Last, First, M.I.)	ADC No.		Date	
Erekson, Ornon D	093150		3-19-13	
Institution		Case Number		
Yoma/Lapaz unit		408-014-13		
TO: Director Charles L Ryan	1			
I am appealing the decision of for the following reasons:				
IF you read my informal Complaint an	of my grievous in	this Matter	My Pork	we Isn't guen
at avestion in this matter. But it was the	of tracy I nower	Medical only	M taker	edical did to
m by hanny insertith lastion holdings	ne in the CDU and	then Not g	wyne 1	<u>Medical treatment</u>
After my Body was horned is the wroblew. COITI Estrade and C. Hale Are not				
willing to admit what happened. It days offer the first when they took we to the				
NOSPITAL IT LOSS not for PSONIASIS IT WAS NEROUSE MY NOTE NORY LOGS NOWED AND				
bleedy. Agus read informal Complaint Plus Grievance. To date I have not Deivad				
Medical treetment for there mist	ile. And C. Hale	13 tryung a	roug 6	gena in this
mater thank you				
Inmate's Signature Date 3.19	Grievance Co	oordinator's Signat	ure	Date
Response To Inmate By:	Location			
			-	
Staff Signature	and the second s	Date		

DISTRIBUTION:

INITIAL: White & Canary - Grievance Coordinator

Pink - Inmate FINAL: White - Inmate

Canary - Grievance File

Wominguez, Raymono ASPC - Yuma - LA PAZ POBOX 8819 SAN Luis Az 85349 To whom It May Concern; I Raymond Donniguez, Have KNOWN Orrion O. Erekson Jr. since he first arrived to Dekota Unit here in Pung Complex Back in June of 2008. He was a Healthy Individual always working out and very Renaly sick. His skin was in good health. Then on or about Aug. 15, 2012 he was working cut himself which later turned Auto A RASh. He would later try to see staff. Finally around Sept. 1, 2012 He was seen by medical staff they told him he had a Bacterial Infection and was given Antibiotics. That only helped part of the problem. It took care of the Infection But He had broken out in a had rash. He repeatedly tried to see medical but was not helped. He kept putting in H&R's but they Kept Slow playing him. Fround Dec. 31, 2012 we were told they took Him to CDU because he had Scapies.

I AM NOT A Trained medical person but I even know he did Not Have Scabies. Thoy gave him cream to put on his body and. it spread the rash to his entire body. By the time he returned to the yard here at la Paz, he Looked Like the whole top loyer of his skin had been bornt chemically. His skiw was seeping puss from its open somes. What ever they gove him did more damage to his skin than any halp Medical here Refused to help him Sgt. Dixon even went as far As to take pictures, because medical would NOT help him. It is Now March 10, 2013 and He still has ARASH, it itches him bed. And they Still tell him he is cured. It is not Just the medical companies foult, it is also the Inept Nurses that have been here for all the company changes that Never help the Hurt and sick. I declare under penalty of Perjury that the fargoing is true and Correct Executed at La Paz-juma Arizona on March 10 201

MARCH 16th 2013 The been present and witness ORLION EIRCKSONS SKIN CONSITIONS In August 2012 happend to but his hand at work. I noticed later ou Me started to broke out into A rash, that started to spread. For the longest four he was trying to get medical attion. Beginning of Sept. 2012 he was seen by medical, He received some Antibiotics. The each never went Away, it started to spread budly. At the send of Dee, they rolled him up and took him to C.D.V. He looked pretty bad. He was getting I know he was some for Awhile but when he came back and showed ma his Arms, I pimost got siek It looked like he had no skin. Bloody, pus is what it looked like. I couldn't believe they sent him back here in that condition. He should of nover returned in that shape. Its march 16th, Firekson still has has rash, And Still not receving The medical Attention that he news. Joel FOIN#146189 SAN Leis AZ.